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Fill in this information to identify you	ur case:	i
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Ty First Name B Middle Name	First Name Middle Name
	Bring your picture identification to your meeting	Black Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx - xx - <u>3</u> <u>5</u> <u>5</u> <u>9</u> OR	xxx - xx
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1 Ty B Black		Ty B Black			Case number (if known)			
			About Debtor 1	l:	About Debtor 2 (S	Spouse Only in a Joint Case):		
4.	-	isiness names	☐ I have not	used any business names or EINs.	. I have not use	ed any business names or EINs.		
		nployer cation Numbers	Ty Black DDS	S PLLC				
	. , .	ou have used in t 8 years	Business name		Business name			
		trade names and	Business name		Business name			
		ousiness as names	Business name		Business name			
			_		_			
			EIN		EIN			
5.	Where	you live			If Debtor 2 lives a	t a different address:		
			622 Princess	Place				
			Number Street		Number Street			
			Tyler	TX 75704				
			City	State ZIP Code	City	State ZIP Code		
			Smith County		County			
			If your mailing	address is different from	If Debtor 2's maili	ng address is different		
				fill it in here. Note that the any notices to you at this	from yours, fill it in here. Note that the court will send any notices to you at this mailing			
				mailing address.		address.		
			Number Street	_	Number Street	_		
			P.O. Box		P.O. Box			
			-					
			City	State ZIP Code	City	State ZIP Code		
6.		ou are choosing	Check one:		Check one:			
	this dis	strict to file for iptcy		ast 180 days before filing this		180 days before filing this		
				nave lived in this district longer other district.	petition, I hav than in any ot	e lived in this district longer her district.		
			·		- I have another			
				ther reason. Explain. S.C. § 1408.)	(See 28 U.S.0	r reason. Explain. C. § 1408.)		
		I - 11 11						
Р	art 2:	Tell the Court A	bout Your Bank	ruptcy Case				
7.		apter of the		a brief description of each, see Not				
		uptcy Code you posing to file	for Bankruptcy (F	form 2010)). Also, go to the top of p	page 1 and check the	appropriate box.		
	under	-	Chapter 7					
			Chapter 11					
			Chapter 12					
			Chapter 13					

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Debtor 1 Ty B Black			Case number (if known)						
8.	How you will pay the fee	co	rill pay the entire fee when I file murt for more details about how you may with cash, cashier's check, or mon half, your attorney may pay with a cr	nay pay. Typically, if you are pa ey order. If your attorney is sub	ying the fee yourself, you may mitting your payment on your				
			eed to pay the fee in installments. lividuals to Pay The Filing Fee in Ins	, , ,	and attach the Application for				
		By tha fee	equest that my fee be waived (You law, a judge may, but is not required in 150% of the official poverty line the in installments). If you choose this ng Fee Waived (Official Form 103B)	d to, waive your fee, and may do nat applies to your family size ar option, you must fill out the App	o so only if your income is less and you are unable to pay the				
9.	Have you filed for	□ No							
	bankruptcy within the last 8 years?	√ Ye	S.						
		District	Eastern District of Texas	When <u>09/19/2018</u> MM / DD / YYYY	Case number <u>18-60604</u>				
		District	Eastern District of Texas	When <u>02/17/2014</u> MM / DD / YYYY	Case number 14-60097				
		District		When	Case number				
10.	Are any bankruptcy	√ No							
	cases pending or being filed by a spouse who is	☐ Ye	S.						
	not filing this case with you, or by a business	Debtor		Relations	hip to you				
	partner, or by an	District		When	Case number,				
	affiliate?			MM / DD / YYYY	if known				
		Debtor		Relations	hip to you				
		District			Case number,				
				MM / DD / YYYY	if known				
11.	Do you rent your residence?	✓ No □ Ye		viction judgment against you?					
			No. Go to line 12. Yes. Fill out Initial Stateme and file it as part of this ba	ent About an Eviction Judgment	Against You (Form 101A)				

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Deb	otor 1 Ty B Black				Case number	(if known) _		
Pa	art 3: Report About	Any B	usine	sses You Own as a	a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	ousiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or			Name of business, if any Number Street				
	LLC.							
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busi Single Asset Rea Stockbroker (as of	e box to describe your business ness (as defined in 11 U.S.C. § al Estate (as defined in 11 U.S.C. defined in 11 U.S.C. § 101(53A er (as defined in 11 U.S.C. § 10	§ 101(27A)) C. § 101(51E	ZIP Co	ode
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S.C.	che are mo	oosing a sma st rece if any o	to proceed under Subch Il business debtor or you nt balance sheet, staten f these documents do no	the court must know whether y apter V so that it can set approu are choosing to proceed underent of operations, cash-flow stot exist, follow the procedure in	opriate deadli er Subchapte tatement, and	ines. If you er V, you m d federal in	u indicate that you ust attach your come tax return
	§ 1182(1)? For a definition of small	$\overline{\mathbf{A}}$	No.	I am not filing under C	hapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small b	usiness debt	or accordin	ng to the definition in
			Yes.		ter 11, I am a small business d I I do not choose to proceed un		-	
			Yes.	• •	ter 11, I am a debtor according		•	` '
P	art 4: Report If You	Own o	r Hav	e Any Hazardous I	Property or Any Propert	y That Ne	eds Imm	nediate Attentior
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	? Number Street			
					City		State	ZIP Code

Debtor 1 Ty B Black Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:					
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me				
	dendency that makes me				

☐ I am not required to receive a briefing about

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1	Ty B Black				Case number (if	know	n)
P	art 6:	Answer These C	Questi	ons for Reporting P	urpos	ses		
16.	What ki	ind of debts do you	16a.	•	dual p	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	•	inves	iness debts? Business deb tment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.
17. Are yo		u filing under r 7?	V	No. I am not filing unde	r Chap	oter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?		-		•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you se your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Ty B Black		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I decla and correct.	re under penalty of perjury that the information provided is true	•		
		•	am aware that I may proceed, if eligible, under Chapter 7, 11, 12, iderstand the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the cha	apter of title 11, United States Code, specified in this petition.			
		•	oncealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, nd 3571.			
		X /s/ Ty B Black Ty B Black, Debtor 1	X Signature of Debtor 2	_		
		Executed on 12/30/2021 MM / DD / YYYY	Executed on			

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Debtor 1 Ty B Black		Case number (if know	n)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
	X /s/ William H. Lively, Jr. Signature of Attorney for Debtor	Date	12/30/2021 MM / DD / YYYY				
	William H. Lively, Jr.						
	Printed name William H. Lively, Jr.			_			
	Firm Name WHL, PLLC						
	Number Street 432 S. Bonner Ave.						
	<u>Tyler</u>	TX	75702				
	City	State	ZIP Code				
	Contact phone (903) 593-3001	Email address		_			
	00786066		_				
	Bar number	State					

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Fill in this in	nformation to i	dentify your case	and this filing:		
Debtor 1	Ty	В	Black		
Dobies 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States B	ankruptcy Court fo	or the: EASTERN DIS	TRICT OF TEXAS		
Case number				☐ Check	if this is an
(if known)				—	ed filing
Off: =: =1	400A/D				
Official Forr					
Schedule A	VB: Propert	У			12/15
filing together, be sheet to this for	ooth are equally rem. On the top of	esponsible for supply any additional pages,	te as complete and accurate as ping correct information. If more write your name and case numbers, Land, or Other Real Es	space is needed, attach a er (if known). Answer eve	separate ry question.
		al or equitable interes	in any residence, building, land	l, or similar property?	
<u> </u>	o to Part 2. Vhere is the proper	ty?			
	-	•	of your entries from Part 1, incluite that number here	_	\$0.00
Part 2: D	escribe Your \	/ehicles		•	
-		•	n any vehicles, whether they are also report it on Schedule G: Exec	_	
3. Cars, vans,	trucks, tractors,	sport utility vehicles,	motorcycles		
□ No ▼ Yes					
3.1.		Who has	an interest in the property?	Do not deduct secured clai	ms or exemptions. Put the
Make:	Toyota	Check on	e.	amount of any secured clair	
Model:	Tundra		or 1 only	Creditors Who Have Claim	
Year:	2020	<u> </u>	or 2 only or 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile	eage:	_	st one of the debtors and another	\$45,000.00	\$45,000.00
Other information	1:				
2020 Toyota To	undra	— — — — — — — — — — — — — — — — — — —	k if this is community property nstructions)		
3.2.		Who has	an interest in the property?	Do not deduct secured clai	ms or exemptions. Put the
Make:	Toyota	Check on		amount of any secured clair	
Model:	Camry	= paka	or 1 only	Creditors Who Have Claim	
Year:	2021	_	or 2 only or 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile	eage:		st one of the debtors and another	\$28,000.00	\$28,000.00
Other information	1:	ب		·,	,
2021 Toyota C	amry		k if this is community property nstructions)		

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Deb	tor 1	Ty B Black	Case number (if known)	
4.		es: Boats, trail	notor homes, ATVs and other recreational vehicles, other vehicles, and accessories lers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.	Add the	e dollar value	of the portion you own for all of your entries from Part 2, including any I have attached for Part 2. Write that number here	\$73,000.00
			'	
	art 3: /ou own		Your Personal and Household Items egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and les: Major appl	d furnishings iances, furniture, linens, china, kitchenware	
	_	s. Describe	furniture, major appliances	\$3,000.00
7.		es: Televisions	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; ections; electronic devices including cell phones, cameras, media players, games	ı
	_	s. Describe	electronics	\$500.00
8.	Exampl	•	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles	I
	✓ No ☐ Yes	s. Describe		
9.			s and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; d kayaks; carpentry tools; musical instruments	
	□ No ▼ Yes	s. Describe	5 guns	\$2,500.00
10.	✓ No	es: Pistols, rifl	es, shotguns, ammunition, and related equipment	ı
	Yes	s. Describe		
11.	Clothes Exampl ☐ No	-	clothes, furs, leather coats, designer wear, shoes, accessories	
	_	s. Describe	clothing	\$500.00
12.			ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes	s. Describe		

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Debt	or 1	Ty B Black				Case number (if known)	
	Examp	rm animals les: Dogs, cats	, birds, horse	s			
	□ No ✓ Yes	s. Describe	3 dogs, 2	cats			\$5.00
	Any ot	-	nd househol	ld items you did not a	lready list, including a	any health aids you	
	_	s. Give specific	1				
15.	Add the	e dollar value e ed for Part 3. \	of all of your Write the num	entries from Part 3, in	ncluding any entries fo	or pages you have	\$6,505.00
Pa	rt 4:	Describe	Your Fina	ncial Assets			
Do y	ou owr	or have any l	egal or equit	able interest in any of	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	√ No	petition	•	·	·	nd on hand when you file your	
	Yes	S				Cash:	
	•	-	houses, and		•	shares in credit unions, accounts with the same	
	□ No ☑ Yes	S		Institution name:			
	17	'.1. Checking	g account:	personal checkir	ng w/Southside		\$100.00
		, mutual funds les: Bond fund			nge firms, money market	t accounts	
	✓ No ☐ Yes		Instituti	ion or issuer name:			
				erests in incorporated o, and joint venture	d and unincorporated	businesses, including	
	info	s. Give specific ormation about m		of entity:		% of ownership:	

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Debtor 1 Ty B Black Ca				_ Case number (if known)	
20.	Negotiable instruments incl	ude personal check	r negotiable and non-negotiab ss, cashiers' checks, promissory not transfer to someone by sign	y notes, and money orders.		
	✓ No Yes. Give specific information about them	Issuer name:				
21.	Retirement or pension acc Examples: Interests in IRA, profit-sharing pla	, ERISA, Keogh, 40	11(k), 403(b), thrift savings acco	ounts, or other pension or		
	✓ No Yes. List each account separately.	Гуре of account:	Institution name:			
22.		posits you have ma	ade so that you may continue so I rent, public utilities (electric, g			
	✓ No ☐ Yes		Institution name or individual:			
23.	Annuities (A contract for a No Yes		ayment of money to you, either description:	for life or for a number of year	ırs)	
24.	_	IRA, in an account	in a qualified ABLE program,	, or under a qualified state t	uition pro	ogram.
	✓ No ☐ Yes	Institution name ar	nd description. Separately file t	the records of any interests.	11 U.S.C.	§ 521(c)
25.	Trusts, equitable or future powers exercisable for yo		erty (other than anything liste	d in line 1), and rights or		
	NoYes. Give specific information about them					
26.	Examples: Internet domain		ets, and other intellectual proproceeds from royalties and lice	• •		
	✓ NoYes. Give specific information about them					
27.			ingibles s, cooperative association holdi	ings, liquor licenses, professi	onal licen	ses
	✓ No✓ Yes. Give specific information about them					
Mor	ney or property owed to you	u?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you					
	✓ No ☐ Yes. Give specific info	rmation			Federal	
	about them, including w	vhether			State:	•
	you already filed the ret and the tax years	l l			Local:	

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Deb	tor 1 Ty B Black Case number	r (if known)
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce	settlement, property settlement
	✓ No ✓ Yes. Give specific information	Alimony:
		Maintenance:
		Support:
		Divorce settlement:
		Property settlement:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation procompensation, Social Security benefits; unpaid loans you made to someone else No	ay, workers'
	Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner ✓ No ✓ Yes. Name the insurance company of each policy and list its value	's, or renter's insurance Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are curentitled to receive property because someone has died No Yes. Give specific information	rently
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for Examples: Accidents, employment disputes, insurance claims, or rights to sue	payment
	✓ No Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the drights to set off claims No Yes. Describe each claim	ebtor and
	Tes. Describe each dam	
35.	Any financial assets you did not already list	
	✓ No✓ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you hattached for Part 4. Write that number here	nave
Pa	Describe Any Business-Related Property You Own or Have an Interest	est In. List any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓ No. Go to Part 6. ✓ Yes. Go to line 38.	

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Debtor 1 Ty B Black		Ty B Black	Case number (if known)	Case number (if known)			
				Current value of the portion you own? Do not deduct secured claims or exemptions.			
38.	Accoun	ts receivable or comm	issions you already earned				
	✓ No ☐ Yes.	Describe]			
39.	Example	quipment, furnishings, es: Business-related con desks, chairs, electr	mputers, software, modems, printers, copiers, fax machines, rugs, telephones,				
	✓ No ☐ Yes.	. Describe]			
40.	Machine	ery, fixtures, equipmen	t, supplies you use in business, and tools of your trade				
	✓ No ☐ Yes.	. Describe]			
44	Inventor			J			
41.	Inventor	y					
	✓ No ☐ Yes.	. Describe]			
42.	Interest	s in partnerships or joi	int ventures	_			
	√ No						
		Describe Name of	entity: % of ownership:				
43.	Custom	er lists, mailing lists, c	or other compilations				
	✓ No ☐ Yes.	□ No	personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	7			
		Yes. Describe					
44.	Any bus	ا siness-related property	you did not already list	J			
	✓ No ☐ Yes.	. Give specific informat	ion.				
45.			our entries from Part 5, including any entries for pages you have number here	\$0.00			
P			n- and Commercial Fishing-Related Property You Own or Have a n interest in farmland, list it in Part 1.	n Interest In.			
46.	Do you	own or have any legal	or equitable interest in any farm- or commercial fishing-related property?				
	_	Go to Part 7. Go to line 47.					

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Deb	tor 1	Ty B Black	Case number (if known)	
4-7				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm au	nimals es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes]
48.	Crops	either growing or harvested		
		. Give specific rmation]
49.	Farm a	nd fishing equipment, implements, machinery, fixtures,	and tools of trade	
	✓ No ☐ Yes	·]
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes	·]
51.	Any far	m- and commercial fishing-related property you did no	t already list	
		:. Give specific rmation]
52.		e dollar value of all of your entries from Part 6, includin d for Part 6. Write that number here		\$0.00
P	art 7:	Describe All Property You Own or Have an Ir	terest in That You Did Not List Above	
53.		have other property of any kind you did not already lises: Season tickets, country club membership	t?	
	✓ No ☐ Yes	s. Give specific information.		
54.	Add the	e dollar value of all of your entries from Part 7. Write th	at number here →	\$0.00

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Debtor 1	Ty B Black	Case nu	ımber (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	: Total real estate, line 2		→	\$0.00
56. Part 2	: Total vehicles, line 5	\$73,000.00		
57. Part 3	: Total personal and household items, line 15	\$6,505.00		
58. Part 4	: Total financial assets, line 36	\$100.00		
59. Part 5	: Total business-related property, line 45	\$0.00		
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	: Total other property not listed, line 54	+\$0.00		
62. Total _l	personal property. Add lines 56 through 61	\$79,605.00	Copy personal property total	+ \$79,605.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$79,605.00

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Fill in this inf	ormation to ide	entify your	case:					
Debtor 1	Ту	В	Black					
Debtor 2	First Name	Middle Name	e Last Name					
(Spouse, if filing)	First Name	Middle Name	e Last Name					
United States Ba	nkruptcy Court for t	he: EASTER I	N DISTRICT OF TE	XAS	<u> </u>		Check if this is an	
Case number (if known)					-		amended filing	
Official Form	106C							
Schedule C	: The Proper	ty You Cl	aim as Exemp	ot				04/19
Using the property space is needed, f	you listed on Sche	<i>dule A/B: Prop</i> this page as m	perty (Official Form 106	6A/B) as your sou	ırce, list th	esponsible for supplying correct info e property that you claim as exemp ssary. On the top of any additional	t. If more
is to state a speci exempted up to the receive certain be exemption of 100 property is deterr	ific dollar amount a ne amount of any a enefits, and tax-exe % of fair market va nined to exceed th	as exempt. Al applicable statempt retirement alue under a la at amount, yo	ternatively, you may tutory limit. Some ex nt funds-may be unl aw that limits the exe our exemption would	clai cemp imite mpti	m the full fai otionssuch ed in dollar a ion to a parti	ir market as those amount. I icular doll	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.	
Part 1: Ide	entify the Prope	erty You Cla	aim as Exempt					
	exemptions are yo	•	Check one only,		,	ŭ	with you.	
	claiming state and f claiming federal ex		kruptcy exemptions.	11 U	.S.C. § 522(b	o)(3)		
_					en to do a to e		La Laure	
			nat you claim as exen	•		ormation		
-	of the property and t lists this property		Current value of the portion you own		ount of the emption you	claim	Specific laws that allow exemp	tion
			Copy the value from Schedule A/B		eck only one ch exemption			
Brief description:	_		\$3,000.00	$\overline{\mathbf{A}}$	\$3,00	0.00	11 U.S.C. § 522(d)(3)	
furniture, major Line from Schedul					100% of fa value, up to applicable limit	o any		
Brief description:			\$500.00	<u> </u>	\$500	.00	11 U.S.C. § 522(d)(3)	
electronics Line from Schedul	e A/B: 7				100% of fa value, up to applicable limit	o any		
(Subject to ac	d you acquire the pr	2 and every 3 y	more than \$170,350? years after that for cas	es fi			, ,	

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Debtor 1	Ty B Black		Case numbe	Case number (if known)			
Part 2:	Additional Page						
	ption of the property and line on /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption				
Brief descrip 5 guns Line from So	tion: chedule A/B: 9	\$2,500.00	\$2,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			
Brief descrip clothing Line from So	tion: chedule A/B:11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief descrip 3 dogs, 2 dogs,		\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
-	tion: hecking w/Southside chedule A/B:17.1	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			

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				_			
Fill in this info	ormation to identif	y your case:					
Debtor 1	Ty B	liddle Name	Black Last Name				
Debtor 2							
(Spouse, if filing)	First Name M	liddle Name	Last Name				
United States Bar	nkruptcy Court for the: E	ASTERN DIST	RICT OF TEXAS				
Case number (if known)						Check if this is amended filing	
Official Form	106D						
Schedule D:	Creditors Who	Have Clai	ms Secured by	Property	y		12/15
correct informatio	nd accurate as possible n. If more space is nee additional pages, write	eded, copy the A	Additional Page, fill it o	out, number t			
✓ No. Che	ors have claims secure ck this box and submit the in all of the information le	nis form to the co		edules. You h	ave noth	ning else to report on th	s form.
Part 1: Lis	t All Secured Clain	าร					
claim, list the c	creditor separately for eap particular claim, list the lible, list the claims in alp	or has more than one secured reach claim. If more than one ne other creditors in Part 2. As alphabetical order according to the value of collateral claim value of collateral claim					Column C Unsecured portion If any
2.1		Describe the page 5 secures the cl					
Creditor's name		-					
Number Street		-					
City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c to a communit Date debt was inc	Debtor 2 only the debtors and another claim relates by debt	Contingent Unliquidate Disputed Nature of lien. An agreem Statutory li Judgment Other (incl		s mortgage or	secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

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				•		
Fill in this inf	ormation to i	dentify your c	ase:			
Debtor 1	Ty First Name	B Middle Name	Black Last Name			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	r the: EASTERN	DISTRICT OF TEXAS			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
Do not include any If more space is not to this page. On the space is not to this page.	y creditors with eeded, copy the he top of any ad	partially secured Part you need, f Iditional pages, w	and on Schedule G: Executory Co I claims that are listed in Schedul ill it out, number the entries in the rrite your name and case number secured Claims	e D: Creditors Who He boxes on the left. A	lold Claims Secur	ed by Property.
1. Do any credit	tors have priorit	y unsecured clai	ms against you?			
☐ No. Go t	o Part 2.					
∀ Yes.						
claim. For each show both price space is	ch claim listed, ic ority and nonprior	lentify what type o ity amounts. As n ity unsecured clai	creditor has more than one priority f claim it is. If a claim has both prio nuch as possible, list the claims in a ms, fill out the Continuation Page of	rity and nonpriority am alphabetical order acco	ounts, list that clain ording to the credite	m here and or's name. If
(For an explar	nation of each typ	e of claim, see th	e instructions for this form in the ins	truction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$113,176.72	\$95,963.00	\$17,213.72
IRS Special Prod			- Last 4 digits of account number			
Priority Creditor's Nam 1100 Commerce			When was the debt incurred?			
Number Street Mail Code 5020			. When was the dept incurred:	various	_	
Mail Code 5020	DAL		As of the date you file, the claim	is: Check all that app	oly.	
Delles	TV	75040	Contingent Unliquidated			
Dallas City	TX State	75242 ZIP Code	- Disputed			
Who incurred the	debt? Check	one.	Type of PRIORITY unsecured cl	aim:		
Debtor 1 only Debtor 2 only			☐ Domestic support obligations☐ Taxes and certain other debts	vou owe the governm	ont	
Debtor 1 and D	Debtor 2 only		✓ Taxes and certain other debts✓ Claims for death or personal i	,	ent	
At least one of	the debtors and		intoxicated	•		
Is the claim subject	claim is for a cor	nmunity debt	Other. Specify			
No No	or to onset!					
Yes						

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Debtor 1 Ty B Black	C	Case number (if known)					
Part 1: Your PRIORITY Unsecu	red Claims Continuation Page							
After listing any entries on this page, numb previous page.	er them sequentially from the	Total claim	Priority amount	Nonpriority amount				
2.2		\$2,848.00	\$2,848.00	\$0.00				
William H Lively Jr. Priority Creditor's Name WHL, PLLC Number Street	Last 4 digits of account number When was the debt incurred?	9/17/2018	-					
432 S. Bonner Ave.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply.						
Tyler TX 75702 City State ZIP Code	Contingent Unliquidated Disputed							
Who incurred the debt? Check one.	Type of PRIORITY unsecured cla	nim:						
☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community of the claim subject to offset? ☑ No ☐ Yes	Domestic support obligations Taxes and certain other debts Claims for death or personal in intoxicated Other. Specify Attorney fees for this case	njury while you were	ent					

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Debtor 1	Гу В Black	Case number (if known)
Part 2:	List All of Your NONPRIORITY	Unsecured Claims
No. Yes 4. List all o If a credit type of cl	f your nonpriority unsecured claims into the formation has more than one nonpriority unsectaim it is. Do not list claims already inclu	Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Bured claim, list the creditor separately for each claim. For each claim listed, identify what aided in Part 1. If more than one creditor holds a particular claim, list the other creditors in assecured claims, fill out the Continuation Page of Part 2.
Us Dept Of I Nonpriority Credi PO Box 164 Number Str	itor's Name	\$152,308.68 Last 4 digits of account number 7 7 6 1 When was the debt incurred? 02/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
At least or Check if t	only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Educational

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Debtor 1	Ty B Black					Case	e number (if known)
Part 3:	List Others	s to Be	Notified Abou	ıt a Debt Tha	t You Already	/ Lis	sted
For ex credite debts	ample, if a collect or in Parts 1 or 2 that you listed in	ction ag , then li Parts	gency is trying to o	collect from you gency here. Sir itional creditors	for a debt you o milarly, if you ha	we n	bbt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
	Infosource			On which en	try in Part 1 or P	art 2	2 did you list the original creditor?
Name Agent for	First Data Glob	al Lea	sing	Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number PO BOX 2	Street 48838			Credit Acco	unt		Part 2: Creditors with Nonpriority Unsecured Claims
· · · · · ·				_	_	_	
Oklahoma	a City	ок	73124	 Last 4 digits 	of account num	ber	
City		State	ZIP Code	_			
Amy Bate	s Ames			On which en	try in Part 1 or P	art 2	2 did you list the original creditor?
Name 407 E Fou	ırth St			Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number PO Box 20	Street 009			_			Part 2: Creditors with Nonpriority Unsecured Claims
				_	_		
Tyler		TX	75710-2009	 Last 4 digits 	of account num	ber	
City		State	ZIP Code	_			
Attorney (General of Texa			On which en	try in Part 1 or P	art 1	2 did you list the original creditor?
Name		4 3		_	•		
	port Division Street			_ Line Domestic S			Part 1: Creditors with Priority Unsecured Claims
Attn: Ang	ela Lancelin			– Domestic 3	аррогі		Part 2: Creditors with Nonpriority Unsecured Claims
6161 Savo	oy Ste. 320			Last 4 digits	of account num	ber	
Houston		TX	77036	_			
City		State	ZIP Code				
Capital 1	Bank			On which en	try in Part 1 or P	art 2	2 did you list the original creditor?
Name Attn: Ran	kruptcy Dept.			— Line (of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street				ebt-owed by		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 3	0285			 Ty Black DI 	OS, PLLC	ч	
Salt Lake	City	UT State	84130 ZIP Code	Last 4 digits	of account num	ber	<u>4</u> <u>7</u> <u>8</u> <u>9</u>
Dana She	ly Black			On which en	try in Part 1 or P	art 2	2 did you list the original creditor?
Name 6100 Holly	ytree #266			Line	of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street				ŕ		Part 2: Creditors with Nonpriority Unsecured Claims
				- Last 4 digits	of account num	ber	
Tyler		TX	75703	_			
City		State	ZIP Code				

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Debtor 1	Ty B Black			Case number (if known)
Part 3:	List Others to B	e Notified Ab	out a Debt That You Already	y Listed Continuation Page
	Global Leasing		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name PO Box 17	3845		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		Business Debt-owed by Ty Black DDS, PLLC	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account num	ber
Denver City	CO State	80217 ZIP Code	_	<u> </u>
Glen Patrio	ck		On which entry in Part 1 or F	Part 2 did you list the original creditor?
PO Box 93	8		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claims
	TX	75771	— Last 4 digits of account num	ber
City	State	ZIP Code		
HPSC Name			On which entry in Part 1 or F	Part 2 did you list the original creditor?
c/o Lowri	Γhomas		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street nons Lane, Suite 790)	Business Debt-owed by Ty Black DDS, PLLC	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account num	ber
Houston	TX	77027		
City	State	ZIP Code		
IRS			On which entry in Part 1 or F	Part 2 did you list the original creditor?
PO BOX 73	346		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account num	ber
Philadelph		19101	<u> </u>	
City	State	ZIP Code		
Ladd & Th	igpen, PC		On which entry in Part 1 or F	Part 2 did you list the original creditor?
	adway St., Suite 200		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number S	Street		Business Debt-owed by Ty Black DDS, PLLC	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account num	ber
Tyler City	TX State	75702 ZIP Code		
	Business Loans		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name 2015 Vaug	hn Rd. Bldg 500	·	Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street			Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account num	ber
Kennesaw City	GA State	30144 ZIP Code		—
~ 1.7	Ciale			

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Debitor I IYBB	іаск			Case number (if known)
Part 3: List 0	Others to Be	Notified Ab	out a Debt That You Already	/ Listed Continuation Page
Newlogic Busines	s Loans		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name 300 Ledgewood P	lace Suite 30	11	Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street	iace, ouite oc	, <u> </u>	Business Debt-owed by	Part 2: Creditors with Nonpriority Unsecured Claims
			— Ty Black DDS, PLLC	T art 2. Creditors with Nonphority offsecured Grainis
Pookland	MA	02370	Last 4 digits of account num	ber
Rockland City	State	ZIP Code		
Office of the Attor	nev General		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name	_			•
Child Support Divi	ision			Part 1: Creditors with Priority Unsecured Claims
3520 Robertson R	oad, Ste. 501		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account num	her
Tyler	TX	75701		
City	State	ZIP Code		
Office of the U. S.	Trustee		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name 110 N. College, Su	iite 300		Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
				. ,
Tyler	TV	75700	Last 4 digits of account num	ber
Tyler City	TX State	75702 ZIP Code		
Phillip Emerson Name			On which entry in Part 1 or P	art 2 did you list the original creditor?
6161 Savoy, Suite	320		Lineof (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
Houston	TX	77036	Last 4 digits of account num	per
City	State	ZIP Code		
Portfolio Recovery	v		On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name PO Box 41067	,		Line of (Check one):	
PO Box 41067 Number Street			Credit Account	
				Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	ber
Norfolk City	VA State	23541 ZIP Code		
J.,	Clair	2 0000		
Regions Bank			On which entry in Part 1 or P	art 2 did you list the original creditor?
Name PO Box 10063			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			Check Credit or Line of	Part 2: Creditors with Nonpriority Unsecured Claims
			Credit	
Rirmingham	ΛI	35202	Last 4 digits of account num	ber
Birmingham City	AL State	ZIP Code		

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Debtor 1	Ty B Black			Case number (if known)
Part 3:	List Others to B	e Notified Abo	ut a Debt That You Already	/ Listed Continuation Page
Ruth Harr	is Yeager		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name Assistant	U.S. Attorney		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
TTU N COI	lege, Suite 700		<u>—</u>	
-			 Last 4 digits of account num 	ber
Tyler City	TX State	75702 ZIP Code	_	
,				
Smith Co	unty		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name c/o Meliss	sa Palo		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street	1000		Part 2: Creditors with Nonpriority Unsecured Claims
2111 N. 3	temmons Frwy, Ste.	1000	_	
D-II	TV	75007	 Last 4 digits of account num 	ber
Dallas City	TX State	75207 ZIP Code	<u> </u>	
	Chapter 13 Trustee		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name 110 N. Co	llege, 12th Floor		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			_	
			 Last 4 digits of account num 	ber
Tyler City	TX State	75702 ZIP Code	_	
- ,				
State Con	nptroller of Public Ac	counts	On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name PO BOX 1	3528		Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			_ ·	Tart 2. Greaters with Nonphority endeduced Glaims
			 Last 4 digits of account num 	ber
Austin City	TX State	78711-3528 ZIP Code	_	
Oity	Ciaio	2 0000		
Stern-Tyle	er Dental Lab		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name	ın Plaza Suite 300		Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street		Business Debt-owed by	Part 2: Creditors with Nonpriority Unsecured Claims
			— Ty Black DDS, PLLC	Fatt 2. Creditors with Nonphority onsecured Claims
			 Last 4 digits of account num 	ber
Tyler	TX	75704	_	
City	State	ZIP Code		
Texas Wo	orkforce Commission		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name			Line of (Check one):	Part 1: Craditors with Priority Unsecured Claims
P.O. Box	Street		Required Notification	Part 1: Creditors with Priority Unsecured Claims
			—	Part 2: Creditors with Nonpriority Unsecured Claims
			 Last 4 digits of account num 	ber
Austin City	TX State	78714-9080 ZIP Code	<u> </u>	
Oity	State	ZIF COUL		

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Debior 1 I B Black				Cas	e number (if known)
Part 3: List Other	rs to B	e Notified Abo	ut a Debt That You Alread	y Li	isted Continuation Page
Texas Workforce Comm	nission		On which entry in Part 1 or	Part	2 did you list the original creditor?
Name PO Box 149037			Line of (Check one).		Part 1: Creditors with Priority Unsecured Claims
Number Street			Taxes		Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	nber	
Austin City	TX State	78714-9037 ZIP Code	_		
Tyler ISD			On which entry in Part 1 or	Part	2 did you list the original creditor?
Name c/o Tab Beall			Line of (Check one).	: П	Part 1: Creditors with Priority Unsecured Claims
Number Street PO Box 2007			_		Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	nber	
Tyler City	TX State	75710-2007 ZIP Code	<u> </u>		
United States Attorney			On which entry in Part 1 or	Part	2 did you list the original creditor?
Name 110 North College			Line of (Check one).		Part 1: Creditors with Priority Unsecured Claims
Number Street Suite 700			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
			 Last 4 digits of account nun 	nber	
Tyler City	TX State	75702 ZIP Code	_		
US Department of Educ	ation		On which entry in Part 1 or	Part	2 did you list the original creditor?
Name Direct Loan Servicing C	Center		Line of (Check one).		Part 1: Creditors with Priority Unsecured Claims
Number Street PO Box 5202			_		Part 2: Creditors with Nonpriority Unsecured Claims
			 Last 4 digits of account num 	nhar	
Greenville City	TX State	75403-5202 ZIP Code	—	ibei	
Yellowstone			On which entry in Part 1 or	Part	2 did you list the original creditor?
Name 160 Pearl St., 6th Floor			Line of (Check one).		Part 1: Creditors with Priority Unsecured Claims
Number Street			Business Debt-owed by Ty Black DDS, PLLC		Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account nun	nber	
New York City	NY State	10005 ZIP Code	_		
,	Cidio	0000			

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Debtor 1	Ty B Black	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$113,176.72
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$2,848.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$116,024.72
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$152,308.68
	6j.	Total. Add lines 6f through 6i.	6j.	\$152,308.68

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Fill in this inf	ormation to id	entify your case	:	
Debtor 1	Ty First Name	B Middle Name	Black Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for	the: EASTERN DIS	TRICT OF TEXAS	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this in	formation to	identify your case	:	
Debtor 1	Ту	В	Black	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court f	or the: EASTERN DIS	TRICT OF TEXAS	
Case number (if known)				☐ Check if this is an amended filing
Official Forn	n 106H			
Schedule H	I: Your Cod	lebtors		12/19
No Yes Within the lainclude Arizo No. Go	ast 8 years, have ona, California, Id o to line 3. id your spouse, fo	e you lived in a commu aho, Louisiana, Nevada	• • • •	ritory? (Community property states and territories o, Texas, Washington, and Wisconsin.)
3. In Column 1 person show creditor on	, list all of your wn in line 2 agai Schedule D (Off	n as a codebtor only if	that person is a guarant edule E/F (Official Form 1	odebtor if your spouse is filing with you. List the or or cosigner. Make sure you have listed the 106E/F), or <i>Schedule G</i> (Official Form 106G). Use
Column 1	1: Your codebto	r		Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1 Spouse Name	Name Not Ent	ered		Schedule D, line
Number	Street			_ Schedule E/F, line <u>5.15</u>
				Schedule G, line
City		Stato	7ID Codo	Phillip Emerson –

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3	ill in this inform	ation to i	dentify your case:								
	Debtor 1	Ту	В		Black						
	Debtor 1	First Name	Middle Name		Last Name			 Che	eck if this is:		
	Debtor 2 (Spouse, if filing)	First Name	Middle Name		Last Name			_ _	An amended filing		
1	United States Bankr	uptcy Court f	or the: EASTERN D	ISTRIC	T OF TE	(AS		_ -	A supplement showing chapter 13 income as	•	
1	Case number (if known)					_			MM / DD / YYYY		
Of	ficial Form 10	61							WIWI/DD/YYYY		
_	chedule I: You		ne								12/15
res inc abo you	ponsible for supply lude information ab out your spouse. If ir name and case n	ving correct bout your sp more space umber (if kn	ossible. If two married information. If you are ouse. If you are separe is needed, attach a secon). Answer every co	e marrie ated ar eparate	ed and not nd your spo sheet to th	filing ouse	jointly is not f	, and your iling with y	spouse is living with you, do not include in	you, ormatio	n
Р	art 1: Descri	be Emplo	yment								
1.	Fill in your emplo information.	yment		Debt	or 1				Debtor 2 or non-fil	ing spou	se
	If you have more the job, attach a separ with information about	ate page out	Employment status	_	Employed Not employ	ed			✓ Employed☐ Not employed		
	additional employe	ers.	Occupation	dent	ist				<u>lvn</u>		
	Include part-time, s or self-employed w		Employer's name	Mob	ile Dental	Care	•		Turtle Creek Sur	gery Ce	enter
	Occupation may in student or homema applies.		Employer's address		25 Greenv er Street	ille A	ve. St	e. 110	805 Turtle Creek Number Street	Dr.	
				Dalla City	as		TX State	75243 Zip Code	Tyler City	TX State	75701 Zip Code
			How long employed ti	here?	9 years	;			15 years		
Р	art 2: Give D	etails Abo	out Monthly Incom					_			_
	imate monthly inco		e date you file this form	n. If yo	u have noth	ning to	report	for any line	e, write \$0 in the space.	Include	your
If yo	ou or your non-filing	spouse have	e more than one employ trate sheet to this form.	er, com	bine the inf	ormat	tion for	all employe	ers for that person on th	e lines b	elow. If
							For D	ebtor 1	For Debtor 2 or non-filing spouse	<u> </u>	
2.			llary, and commissions monthly, calculate what			2.	\$^	13,333.33	\$4,645.40		
3.	Estimate and list	monthly ove	ertime pay.			3.	+	\$0.00	\$0.00	_	

\$13,333.33

\$4,645.40

Calculate gross income. Add line 2 + line 3.

Debi	I y B Black		Case nur	nber ((if known)		
		I	For Debtor 1		r Debtor n-filing s		.	
	Copy line 4 here	4 .	\$13,333.33		\$4,64		_	
5.	List all payroll deductions:			_				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$2,686.70	_	\$63	0.70		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$	0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$27	4.72		
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$	0.00		
	5e. Insurance	5e.	\$0.00		\$	0.00		
	5f. Domestic support obligations	5f.	\$0.00		\$	0.00		
	5g. Union dues	5g.	\$0.00		\$	0.00		
	5h. Other deductions. Specify:	5h. +	\$0.00	_	\$	0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$2,686.70	_	\$90	5.42		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$10,646.63	_	\$3,73	9.98		
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	_	\$	0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00		\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	_		0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00		\$	0.00		
	8e. Social Security	8e.	\$0.00	_		0.00		
	8f. Other government assistance that you regularly receive			_	-			
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00		\$	0.00		
	8g. Pension or retirement income	 8g.	\$0.00	_	\$	0.00		
	8h. Other monthly income.			_				
	Specify:	_ 8h. +	\$0.00	_	\$	0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	_	\$	0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$10,646.63	+ _	\$3,73	9.98]=[\$14,386.61
11	State all other regular contributions to the expenses that you list in \$	- Schedul	ا. م					
•••	Include contributions from an unmarried partner, members of your house friends or relatives.			r roor	mmates,	and otl	her	
	Do not include any amounts already included in lines 2-10 or amounts the	at are no	ot available to pay	expen	ises liste		hedu	
	Specify:					11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie if it applies.					12.		\$14,386.61 Combined nonthly income
13.	Do you expect an increase or decrease within the year after you file	this for	m?					•
	✓ No. Yes. Explain: None.							

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F	ill in this inforn	nation to ide	entify your case:			Cha	alı if thia	ia	
	Debtor 1	Ту	В	Black	1		ck if this An ame	ended filing	
		First Name	Middle Name	Last Na		$ \exists$	A suppl	lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me		chapter followin	· 13 expenses a ig date:	s of the
	United States Bank	ruptcy Court for	the: EASTERN D	ISTRICT OF 1	ΓEXAS		MM / D	D / YYYY	_
	Case number (if known)								
Of	ficial Form 10)6J				-			
Sc	hedule J: Yo	our Expen	ses						12/15
cor nar	rect information. In the second rection in t	If more space is er (if known).	s needed, attach an Answer every quest	other sheet to t	ing together, both an his form. On the top				
ŀ		ibe Your Ho	usehold						
1.	Is this a joint cas	se?							
2.	_ No	Debtor 2 live in s. Debtor 2 mus	a separate househost file Official Form 1 ✓ No		s for Separate House	hold of	f Debtor :	2.	
	Do not list Debtor Debtor 2.		Yes. Fill out this for each depend		Dependent's relati Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you?
	Do not state the d	ependents'							Yes No No
									Yes No Yes No No
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No □ Yes						⁻
P	art 2: Estim	ate Your On	going Monthly E	xpenses					
Est to r	imate your expens	ses as of your b	pankruptcy filing da the bankruptcy is f	te unless you a	re using this form as supplemental Sche			-	
			cash government as it on Schedule I: Yo	-				Your expens	ses
4.			expenses for your reand any rent for the g				2	4	\$1,450.00
	If not included in	line 4:							
	4a. Real estate t	axes					2	4a	
	4b. Property, hor	meowner's, or re	enter's insurance				4	4b	
	4c. Home mainte	enance, repair, a	and upkeep expense	3			4	4c	
	4d. Homeowner's	s association or	condominium dues				4	 4d.	

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Deb	otor 1 Ty B Black	Case number (if known)	
		Your expense	es
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$250.00
	6b. Water, sewer, garbage collection	6b	\$220.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$176.00
	6d. Other. Specify: cellphone	6d	\$284.00
7.	Food and housekeeping supplies	7.	\$850.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$200.00
10.	Personal care products and services	10.	\$75.00
11.	Medical and dental expenses	11.	\$200.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$480.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	\$720.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$331.00
	15b. Health insurance	15b	\$454.00
	15c. Vehicle insurance	15c	\$519.00
	15d. Other insurance. Specify: malpractice insurance	15d	\$91.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 Toyota Financial Services	17a	\$900.00
	17b. Car payments for Vehicle 2 Toyota Financial Services	17b	\$470.00
	17c. Other. Specify: spouse's debt payments	17c	\$1,014.00
	17d. Other. Specify:	17d.	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you.	40	
	Specify:	19.	

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Deb	tor 1	Ty B Black	Case number (if known)				
20.	Other Sche							
	20a.	Mortgages on other property	20a.					
	20b.	Real estate taxes	20b.					
	20c.	Property, homeowner's, or renter's insurance	20c.					
	20d.	Maintenance, repair, and upkeep expenses	20d.					
	20e.	Homeowner's association or condominium dues	20e.					
21.	Other	r. Specify: trash service	21. +	\$25.00				
22.	Calcu	ulate your monthly expenses.						
	22a.	Add lines 4 through 21.	22a.	\$8,709.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	. 22b.					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$8,709.00				
23.	Calcu	ulate your monthly net income.	_					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$14,386.61				
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$8,709.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$5,677.61				
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	u file this form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	V	No.						
		Yes. Explain here: None.						

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Fill in this inf	ormation to i	dentify your case:					
Debtor 1	Ту	В	Black				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS							
Case number				_	Check if this is an		
(if known)					amended filing		
Official Form	106Sum						
Summary of	Your Asse	ets and Liabilit	ies and Certain S	tatistical Informa	ation		

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

301	redules after you me your original forms, you must fill out a new Summary and check the box at the top of this p	Jaye.
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$0.00
	1a. Copy line 55, Total real estate, from Schedule A/B	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$79,605.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$79,605.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$116,024.72
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$152,308.68
	Your total liabilities	\$268,333.40
Р	art 3: Summarize Your Income and Expenses	
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$14,386.6°
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$8,709.00

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Debtor 1 Ty I		Ty B Black	Case number (if known)		
P	art 4:	Answer These Questions for Administrative and Statistic	cal Records		
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?			
	□ No ✓ Ye	o. You have nothing to report on this part of the form. Check this box and su	ubmit this form to the court with your other schedules.		
7.	What k	ind of debt do you have?			
	Ľ	our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis			
		our debts are not primarily consumer debts. You have nothing to report o s form to the court with your other schedules.	n this part of the form. Check this box and submit		
8.	3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$15,72				
9.	Copy th	ne following special categories of claims from Part 4, line 6 of Schedule	e E/F:		
			Total claim		
	From P	art 4 on Schedule E/F, copy the following:			
	9a. Do	omestic support obligations. (Copy line 6a.)	\$0.00		
	9b. Ta	xes and certain other debts you owe the government. (Copy line 6b.)	\$113,176.72		
	9c. Cla	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00		
	9d. Sti	udent loans. (Copy line 6f.)	\$0.00		

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$113,176.72

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		Doc	umem Page 3	0 01 30
Fill in this info	ormation to id	lentify your case	:	
Debtor 1	Ty First Name	B Middle Name	Black Last Name	
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	
		the: EASTERN DIS	TRICT OF TEXAS	
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an Ir	dividual Debt	or's Schedules	12/15
If two married peo	ple are filing tog	ether, both are equal	ly responsible for suppl	ying correct information.
concealing proper	ty, or obtaining i	noney or property by		chedules. Making a false statement, th a bankruptcy case can result in fines up to 519, and 3571.
Sig	n Below			
Did you pay o	or agree to pay se	omeone who is NOT	an attorney to help you	fill out bankruptcy forms?
☑ No				
Yes. Na	me of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 X
 /s/ Ty B Black
 X

 Ty B Black, Debtor 1
 Signature of Debtor 2

 Date
 12/30/2021
 Date

 MM / DD / YYYY
 MM / DD / YYYYY

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Fill in t	his info	ormation to i	dentify your	case:				
Debtor 1		Ty First Name	B Middle Nam	10	Black Last Name			
Dahtara		riistivame	Wildule Nam	ie	Lastivanie			
Debtor 2 (Spouse,	if filing)	First Name	Middle Nam	ne	Last Name			
United S	tates Ban	kruptcy Court fo	or the: EASTER	N DISTR	ICT OF TEX	(AS		
Case nur		.,,						
(if known						_	☐ Check i amende	f this is an ed filing
Official	Form	107						
Statem	ent of	 f Financial	Affairs fo	r Indivi	duals Fi	ling for Bankr	uptcy	04/19
☑ N	is your of larried ot marrie	current marital				here You Lived B	sefore	
_	es. List a	all of the places	you lived in the I		s. Do not inc Debtor 1	lude where you live no Debtor 2:	OW.	Dates Debtor 2
				lived th		2000. 2.		lived there
						☐ Same as Deb	tor 1	Same as Debtor 1
18	3512 Blu	ebird Circle		From	2006			From
Nu	ımber S	treet		— — То	2019	Number Street		— — ———— То
								_
	int	T						<u></u>
Cit	У	St	ate ZIP Code			City	State ZIP Code	
3. Withi	y n the las munity pr	St t 8 years, did ye	ate ZIP Code	-			State ZIP Code nity property state or te vada, New Mexico, Puert	•

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Debtor 1	Ty B Black	Case nur	Case number (if known)			
Part 2:	Explain the Sources of	Your Income				
Fill in If you	ou have any income from employ the total amount of income you recare filing a joint case and you have o es. Fill in the details.	eived from all jobs and all bu	isinesses, including par	t-time activities.	lendar years?	
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
From January 1 of the current year until the date you filed for bankruptcy:		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$132,634.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business		
For the last calendar year: (January 1 to December 31,		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$228,150.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2019)		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$260,218.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business		
Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Secu unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once un Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.						

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Deb	otor 1	Ty B Black	Case number (if known)
P	art 3:	List Certain Payments You Made Before	You Filed for Bankruptcy
6.	Are eith	her Debtor 1's or Debtor 2's debts primarily consume	r debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumincurred by an individual primarily for a personal, far	umer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as mily, or household purpose."
		During the 90 days before you filed for bankruptcy, d	id you pay any creditor a total of \$6,825* or more?
		☐ No. Go to line 7.	
		total amount you paid that creditor. Do not	a total of \$6,825* or more in one or more payments and the include payments for domestic support obligations, such as lude payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/22 and every 3 years	s after that for cases filed on or after the date of adjustment.
	✓ Yes	s. Debtor 1 or Debtor 2 or both have primarily consu	imer debts.
		During the 90 days before you filed for bankruptcy, d	id you pay any creditor a total of \$600 or more?
		No. Go to line 7.	
		_	a total of \$600 or more and the total amount you paid that estic support obligations, such as child support and alimony. by for this bankruptcy case.
7.	Insiders corporat agent, ir	s include your relatives; any general partners; relatives of tions of which you are an officer, director, person in con	a payment on a debt you owed anyone who was an insider? of any general partners; partnerships of which you are a general partner; trol, or owner of 20% or more of their voting securities; and any managing ietor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	s. List all payments to an insider.	
8.		1 year before you filed for bankruptcy, did you make ed an insider?	any payments or transfer any property on account of a debt that
		payments on debts guaranteed or cosigned by an inside	∍r.
	✓ No ☐ Yes	s. List all payments that benefited an insider.	
Р	art 4:	Identify Legal Actions, Repossessions, a	nd Foreclosures
9.	List all s		nrty in any lawsuit, court action, or administrative proceeding? ms actions, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	s. Fill in the details.	

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Deb	tor 1	Ty B Black	Case number (if known)
10.	seized,	1 year before you filed for bankruptcy, was any of your property reposor levied? all that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
		Go to line 11. s. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a k ts from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	s. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a to	otal value of more than \$600 per person?
	✓ No ☐ Yes	s. Fill in the details for each gift.	
14.		2 years before you filed for bankruptcy, did you give any gifts or contr charity?	ibutions with a total value of more than \$600
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.	
Pa	art 6:	List Certain Losses	
15.		1 year before you filed for bankruptcy or since you filed for bankruptc isaster, or gambling?	y, did you lose anything because of theft, fire,
	✓ No ☐ Yes	s. Fill in the details.	

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Debtor 1 Ty B Black		Case number (if known)						
P	art 7:	List Cer	tain P	ayments or	Transfers			
16.		-	-		ıptcy, did you or anyone e nkruptcy or preparing a b	Ise acting on your behalf pay ankruptcy petition?	or transfer any pro	perty to
	Include	any attorney	rs, bankr	ruptcy petition p	preparers, or credit counsel	ing agencies for services requi	red for your bankrupt	cy.
	□ No ✓ Yes	. Fill in the o	details.					
	liam H.	Lively, Jr.			Description and value o	of any property transferred	Date payment or transfer was made	Amount of payment
	IL, PLLC						12/28/2021	\$1,152.00
Num					_		12/20/2021	
432	S. Bon	ner Ave.			_			
Tyl	er		TX	75702				
City			State	ZIP Code	_			
Ema	il or websit	e address			_			
					_			
		ade the Payme						
17.		-	-			lse acting on your behalf pay nake payments to your credite		perty to
	Do not i	nclude any p	ayment	or transfer tha	t you listed on line 16.			
	✓ No ☐ Yes	. Fill in the o	details.					
18.		-	-		ruptcy, did you sell, trade, rse of your business or fil	or otherwise transfer any pronancial affairs?	operty to anyone, ot	her than
		-			s made as security (such a have already listed on this	s granting of a security interest statement.	or mortgage on your	property).
	✓ No ☐ Yes	. Fill in the o	details.					
19.		-	-		kruptcy, did you transfer an called asset-protection de	iny property to a self-settled t vices.)	rust or similar devic	e of which
	✓ No ☐ Yes	. Fill in the o	details.					

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Deb	otor 1	Ty B Black	Case number (if known)
Р	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	sit Boxes, and Storage Units
20.	benefit, Include	1 year before you filed for bankruptcy, were any financial accounts or i, closed, sold, moved, or transferred? checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	
	_	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	☑ No	ou stored property in a storage unit or place other than your home with s. Fill in the details.	in 1 year before you filed for bankruptcy?
Р	art 9:	Identify Property You Hold or Control for Someone Else	
23.		hold or control any property that someone else owns? Include any proin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	
Р	art 10:	Give Details About Environmental Information	
For	the purp	oose of Part 10, the following definitions apply:	
ı	hazardou	mental law means any federal, state, or local statute or regulation concurs or toxic substance, wastes, or material into the air, land, soil, surfact g statutes or regulations controlling the cleanup of these substances, w	water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	oort all ne	otices, releases, and proceedings that you know about, regardless of w	hen they occurred.
24.	Has any law?	y governmental unit notified you that you may be liable or potentially lia	ble under or in violation of an environmental
25.	Have yo	s. Fill in the details. ou notified any governmental unit of any release of hazardous material' s. Fill in the details.	,

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Deb	tor 1	Ty B Black		Case number (if known)
26.	Have yo		or administrative proceeding under any e	environmental law? Include settlements and
	✓ No ☐ Yes	s. Fill in the details.		
Р	art 11:	Give Details About Yo	ur Business or Connections to An	y Business
27.	Within 4		nkruptcy, did you own a business or have	e any of the following connections to any
		A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the None of the above applies. G S. Check all that apply above ar		
Τv	— В Black		Describe the nature of the business contract labor	Employer Identification number Do not include Social Security number or ITIN.
	ness Name		Name of accountant or bookkeeper	EIN:
IVOII	ibei Ott			Dates business existed
				From <u>2013</u> To <u>12/2021</u>
City		State ZIP Code		
28.	all finar	2 years before you filed for bancial institutions, creditors, or		ent to anyone about your business? Include
	س	s. Fill in the details below.		

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Debtor 1	Ty B Black		Case number (if known)
Part 12	Sign Below		
that answe	ers are true and correct. I ur	nderstand that making a false statem a bankruptcy case can result in fines	chments, and I declare under penalty of perjury ent, concealing property, or obtaining money or up to \$250,000, or imprisonment for up to 20 years,
X /s/Ty	B Black	X	2
ТуВВІ	ack, Debtor 1	Signature of Debtor	2
Date _	12/30/2021	Date	
Did you at	tach additional pages to You	ur Statement of Financial Affairs for li	ndividuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes			
Did you pa	ay or agree to pay someone	who is not an attorney to help you fil	out bankruptcy forms?
☑ No			
	Name of person		Attach the Bankruptcy Petition Preparer's Notice,

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F	ill in this inf	ormation to identi	fv vour case:			Check as o	lirected in lines 17	7 and 21:
	ebtor 1	Ту	B Middle Name	Black Last Name		According to t Statement:	he calculations require	d by this
	ebtor 2 Spouse, if filing)	First Name N	Middle Name	Last Name		under 11	ole income is not determ U.S.C. § 1325(b)(3).	
U	nited States Bar	nkruptcy Court for the:	EASTERN DIST	RICT OF TEXAS			ole income is determine U.S.C. § 1325(b)(3).	;a
	ase number f known)			_		-	mitment period is 3 yea mitment period is 5 yea	
Of	fficial Form	122C-1				☐ Check if th	is is an amended filing	
		Statement of Yo			ome			04/20
info	curate. If more ormation applie	nd accurate as possibles pace is needed, attacts. On the top of any a culate Your Avera	ch a separate sho additional pages,	eet to this form. In write your name a	clude the l	ine number to w	hich the additional	
1.	What is your	marital and filing statu	us? Check one or	nly.				
	☐ Not marr	ried. Fill out Column A,	lines 2-11.					
	─ Married.	Fill out both Columns	A and B, lines 2-1	1.				
	bankruptcy c August 31. If in the result. I	rage monthly income ase. 11 U.S.C. § 101(7) the amount of your mor Do not include any incomat property in one colu	10A). For exampl on the state of the state	e, if you are filing or d during the 6 montl than once. For exar	Septembers, add the mple, if both	er 15, the 6-month income for all 6 r h spouses own th	n period would be Marc months and divide the t re same rental property	h 1 through total by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	•	ages, salary, tips, bon	uses, overtime,	and commissions	-	\$11,000.00	\$4,723.19	
3.	Alimony and	maintenance payment	s. Do not include	e payments from a s	pouse.	\$0.00	\$0.00	
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.							
5.	Net income fr	om operating a busine	ess, profession,	or farm				
			Debtor 1	Debtor 2				
	Gross receipts deductions)	s (before all	\$0.00	\$0.00				
	,	necessary operating -	\$0.00	\$0.00	Сору			
	Net monthly in profession, or	come from a business, farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	

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Den	I y B Black				case number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net income from rental and other r	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00	\$0.00	Сору			
	Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	\$0.00	
8.	Unemployment compensation				\$0.00	\$0.00	
	Do not enter the amount if you conte benefit under the Social Security Act						
	For you		\$0.	00			
	For your spouse		\$0.	00			
	disability, combat-related injury or disuniformed services. If you received of title 10, then include that pay only amount of retired pay to which you wunder any provision of title 10 other to	any retired pay paid to extent that it doe ould otherwise be e	d under chapter 61 s not exceed the entitled if retired				
10.	O. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.						
	Total amounts from separate pages,	if any.		+		+	
11.	Calculate your total average month Add lines 2 through 10 for each colun Then add the total for Column A to the	mn.	В.		\$11,000.00	+ \$4,723.19	= \$15,723.19 Total average monthly income
P	art 2: Determine How to M	easure Your De	eductions fror	n Incom	9		
	Copy your total average monthly in						\$15,723.19

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Deb	tor 1	<u>T</u>	y B Black	Case numb	er (if known)			
13.	Calc	culate						
		You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.						
		——Total		\$0.00	Copy here → -	\$0.00		
14.	You	r curr	ent monthly income. Subtract the total in line 13 from line 12			\$15,723.19		
15.			your current monthly income for the year. Follow these ste	•				
	15a.	. Co _l		\$15,723.19				
		Mu	tiply line 15a by 12 (the number of months in a year).			X 12		
	15b.	. The	e result is your current monthly income for the year for this part	of the form		\$188,678.28		
16.	Calculate the median family income that applies to you. Follow these steps:							
	16a.	. Fill	in the state in which you live.					
	16b.		in the number of people in your household. 2					
	16c. Fill in the median family income for your state and size of household							
17.	How	do tl	ne lines compare?					
17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not d under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 12)								
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.							
Pa	art 3	:	Calculate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)				
18.	Сор	y you	r total average monthly income from line 11			\$15,723.19		
19.	that	calcu	e marital adjustment if it applies. If you are married, your spating the commitment period under 11 U.S.C. § 1325(b)(4) alloopy the amount from line 13.					
	19a.	. If th	ne marital adjustment does not apply, fill in 0 on line 19a			\$0.00		
	19b.	. Sul	otract line 19a from line 18.			\$15,723.19		

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Ty B Black	Case number (if known)							
alculate your current monthly income for the year. F	ollow these steps:							
0a. Copy line 19b		\$15,723.19						
Multiply by 12 (the number of months in a year).		X 12						
0b. The result is your current monthly income for the year	ar for this part of the form.	\$188,678.28						
0c. Copy the median family income for your state and s	ize of household from line 16c.	\$71,287.00						
ow do the lines compare?	w do the lines compare?							
<u>-</u>								
t 4: Sign Below								
y signing here, under penalty of perjury I declare that the	information on this statement and in any attachments is true	and correct.						
(/s/ Ty B Black Ty B Black, Debtor 1	X Signature of Debtor 2							
Date 12/30/2021 MM / DD / YYYY	Date							
	alculate your current monthly income for the year. Foa. Copy line 19b	alculate your current monthly income for the year. Follow these steps: Da. Copy line 19b						

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:						
Debtor 1	Ty First Name	B Middle Name	Black Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS						
Case number (if known)						
(- /						

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,292.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$68.00				
7b. Number of people who are under 65	x2	Сору			
7c. Subtotal. Multiply line 7a by line 7b.	\$136.00	here -	\$136.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$142.00	'			
7e. Number of people who are 65 or older	х	Сору			
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	here -	+\$0.00	Сору	
7g. Total. Add lines 7c and 7f			\$136.00	here 🛶	\$136.00

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Debto	or 1	Ty B Black		Case number (if known)	
Loc	al Sta	andards	You must use the IRS Local	al Standards to answer the questions in lines 8-15.	
			om the IRS, the U.S. Trusted s into two parts:	ee Program has divided the IRS Local Standard for housing	
		•	Insurance and operating Mortgage or rent expens	•	
the	link s	-	separate instructions for th	Trustee Program chart. To find the chart, go online using nis form. This chart may also be available at the	
8.		_	_	ng expenses: Using the number of people you entered in line 5, nsurance and operating expenses.	\$594.00
9.	Hou	sing and utilitie	es Mortgage or rent expen	nses:	
	9a.	•	per of people you entered in li for mortgage or rent expense	ine 5, fill in the dollar amount listed \$1,070.00 es.	
	9b.	Total average myour home.	nonthly payment for all mortg	gages and other debts secured by	
			ue to each secured creditor in	nent, add all amounts that are n the 60 months after you file for	
		Name of the o	creditor	Average monthly payment	
					
		9b. Total avera	ige monthly payment	\$0.00 Copy here \rightarrow - \$0.00 Repeat this amount on line 33a.	
	9c.	Net mortgage or	r rent expense.		
			total average monthly paym	ment) from line 9a (mortgage or 0, enter \$0. Copy here \$1,070.00	\$1,070.00
10.	-		_	ivision of the IRS Local Standard for housing is incorrect penses, fill in any additional amount you claim.	
	Expl why:				
11.		al transportation 0. Go to line 14 1. Go to line 12 2 or more. Go t	4. 2.	nber of vehicles for which you claim an ownership or operating expense.	
12.		•		al Standards and the number of vehicles for which you claim the	\$448.00

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btor 1	ТуВІ	Black	Case number (if known)	
ex	opense for e		Local Standards, calculate the net ownership or lease ne expense if you do not make any loan or lease payments on se for more than two vehicles.	
Ve	ehicle 1	Describe Vehicle 1: 2020 Toyota	Tundra	
13	Ba. Ownersh	nip or leasing costs using IRS Local Stand	dard \$533.00	
13	Bb. Average	monthly payment for all debts secured b	y Vehicle 1.	
	Do not ir	nclude costs for leased vehicles.		
	amounts	elate the average monthly payment here a that are contractually due to each secure of the for bankruptcy. Then divide by 60.		
	Name	of each creditor for Vehicle 1	Average monthly payment	
	Toyota		\$785.65	
		Total average monthly payment	+ Repeat this amount on line 33b.	
13		icle 1 ownership or lease expense. line 13b from line 13a. If this number is	Copy net Vehicle 1 expense here \$0.00	\$0.0
Ve	ehicle 2	Describe Vehicle 2: 2021 Toyota (Camry	
13	3d. Ownersh	nip or leasing costs using IRS Local Stand	dard \$533.00	
13		monthly payment for all debts secured b leased vehicles.	y Vehicle 2. Do not include	
	Name	of each creditor for Vehicle 2	Average monthly payment	
	Toyota	Financial	\$498.73	
		Total average monthly payment	\$498.73 Copy here - \$498.73 Repeat this amount on line 33c.	
	Bf. Net Vehi	icle 2 ownership or lease expense.	Copy net Vehicle 2 expense	
13		line 13e from 13d. If this number is less		\$34.27

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Debto	otor 1 Ty B Black Case number (if known)					
15.	also deduct a public transpor	ation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may tation expense, you may fill in what you believe is the appropriate expense, but you may Local Standard for Public Transportation.	\$0.00			
Othe	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for following IRS categories.	the			
16.	employment taxes, social sec your pay for these taxes. Ho	nount that you actually pay for federal, state and local taxes, such as income taxes, self-curity taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 m the total monthly amount that is withheld to pay for taxes.	\$3,317.40			
17.	union dues, and uniform cost	ne total monthly payroll deductions that your job requires, such as retirement contributions, s.s. are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$0.00			
18.	 Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 					
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.					
20.	as a condition for your job	y amount that you pay for education that is either required: b, or tally challenged dependent child if no public education is available for similar services.	\$0.00			
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.					
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					
23.	3. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					
24.	Add all of the expenses allowed Add lines 6 through 23.	owed under the IRS expense allowances.	\$7,286.67			
Add	itional Expense Deductions	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.				
25.	· · · · · · · · · · · · · · · · · · ·	insurance, and health savings account expenses. The monthly expenses for health e, and health savings accounts that are reasonably necessary for yourself, your				
	Health insurance	\$454.00				
	Disability insurance	<u>\$0.00</u>				
	Health savings account	+\$0.00_				
	Total	\$454.00 Copy total here	\$454.00			
	Do you actually spend this to	tal amount?				
	☐ No. How much do you actually spend? ☐ Yes ☐ Yes					
26.	will continue to pay for the remember of your household o	the care of household or family members. The actual monthly expenses that you asonable and necessary care and support of an elderly, chronically ill, or disabled r member of your immediate family who is unable to pay for such expenses. These butions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$0.00			

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Debto	or 1 Ty B Black	Case number (if known)		
27.	Protection against family violence. The reasonably necessary month safety of you and your family under the Family Violence Prevention and By law, the court must keep the nature of these expenses confidential.	* '	_	\$0.00
28.	Additional home energy costs. Your home energy costs are included on line 8.	in your insurance and operating expenses	_	
	If you believe that you have home energy costs that are more than the line 8, then fill in the excess amount of home energy costs.	nome energy costs included in expenses on		
	You must give your case trustee documentation of your actual expenses amount claimed is reasonable and necessary.	s, and you must show that the additional		
29.	Education expenses for dependent children who are younger than \$170.83* per child) that you pay for your dependent children who are yo public elementary or secondary school.	` ` ` `	_	\$0.00
	You must give your case trustee documentation of your actual expense claimed is reasonable and necessary and not already accounted for in I			
	* Subject to adjustment on 4/01/22, and every 3 years after that for case	es begun on or after the date of adjustment.		
30.	Additional food and clothing expense. The monthly amount by which higher than the combined food and clothing allowances in the IRS Natio than 5% of the food and clothing allowances in the IRS National Standard	onal Standards. That amount cannot be more	_	
	To find a chart showing the maximum additional allowance, go online us instructions for this form. This chart may also be available at the bankru	• .		
	You must show that the additional amount claimed is reasonable and ne	ecessary.		
31.	Continuing charitable contributions. The amount that you will continuinstruments to a religious or charitable organization. 11 U.S.C. § 548(d)		+_	\$720.00
	Do not include any amount more than 15% of your gross monthly incom	e.		
32.	Add all of the additional expense deductions. Add lines 25 though 31.			\$1,174.00

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Debte	or 1	Ty B Black			с	ase nu	mber (if known)		
Dec	duction	ns for Debt Payment							
33.		For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.							
			age monthly payment, add all ar e for bankruptcy. Then divide b		are contractua	ally due	e to each secured	d creditor in	
							erage monthly ment		
		Mortgages on your				_	\$0.00		
	33a.					→	\$0.00		
	001	Loans on your first					\$785.65		
							\$498.73		
	33c. 33d.	List other secured do		•••••		7			
		e of each creditor for		tv that	Does paym	nent			
		secured debt	secures the de	•	include tax insurance?	es or			
					□N	lo			
					D Y	es			
					D N				
						es			
						es +			
					_	Γ	\$1,284.38	Copy total	\$1,284,38
		· ·	hly payment. Add lines 33a thro	-		Ľ		here →	φ1,204.30
34.		•	sted in line 33 secured by you ort or the support of your dep		esidence, a v	ehicle,	or other proper	ty	
		No. Go to line 35.							
	<u>d</u>	,	unt that you must pay to a credi	,			,		
		possession of y	your property (called the cure a	mount). Ne	xt, divide by 60	0 and fi	ill in the informat	ion below.	
Nar	ne of t	he creditor	Identify property that secures the debt	Total c amoun			Monthly cure amount		
			-		÷ 60) =			
			-		÷ 60) =			
			-		÷ 60)= + .		Copy total	
					Tot	al	\$0.00	here -	\$0.00
35.	alimo		claimssuch as a priority tax, le as of the filing date of your						
		No. Go to line 36.							
	I		amount of all of these priority cloing priority claims, such as thos						
		Total amount of	of all past-due priority claims				\$116,921.72	÷ 60 =	\$1,948.70

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Debto	r1 Ty B Black	Case number (if known)		
36.	Projected monthly Chapter 13 plan payment	\$5,600.00		
	Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) to the Executive Office for United States Trustees (for all other districts).			
	To find a list of district multipliers that includes your district, go online using the specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.		%	
	Average monthly administrative expense	\$442.40	Copy total here	\$442.40
37.	Add all of the deductions for debt payment. Add lines 33g through 36.			\$3,675.48
Tota	al Deductions from Income			
38.	Add all of the allowed deductions.			
	Copy line 24, All of the expenses allowed under IRS expense allowances	\$7,286.67		
	Copy line 32, All of the additional expense deductions	\$1,174.00		
	Copy line 37, All of the deductions for debt payment	+ <u>\$3,675.48</u>		
	Total deductions	\$12,136.15	Copy total here	\$12,136.15
Par	t 2: Determine Your Disposable Income Under 11 U.S.C. §	1325(b)(2)		
39.	Copy your total current monthly income from line 14 of Form 122C-1, Chap Statement of Your Current Monthly Income and Calculation of Commitment			\$15,723.19
40.	Fill in any reasonably necessary income you receive for support of depend. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part 1 of Form 122C-1, the you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.			
41.	Fill in all qualified retirement deductions. The monthly total of all amounts the your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loan from retirement plans, as specified in 11 U.S.C. § 362(b)(19).			
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here	**************************************		
43.	Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.			
	Describe the special circumstances Amount of expense			
	+ <u></u>			
	Total \$0.00 he	opy ere → + \$0.00		

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Debto	r 1 Ty B E	Black		_ Case r	number (if known)		
44.	Total adjustn	nents.	Add lines 40 through 43		\$12,410.87	Copy here	→	\$12,410.87
45.	Calculate you	ur mon	thly disposable income under § 1325(b)(2). Subtract	t line 44 from	line 39.			\$3,312.32
Par	t 3: Cha	nge ir	n Income or Expenses					
46.	virtually certainformation be	in to ch elow. F	or expenses. If the income in Form 122C-1 or the expange after the date you filed your bankruptcy petition a for example, if the wages reported increased after you column, explain why the wages increased, fill in when the	nd during the filed your peti	time your case v tion, check 122C	vill be ope -1 in the f	n, fi irst	II in the column, enter
	Form	Line	Reason for change	Date of cl		ocrease o ecrease?		Amount of change
	122C-1 122C-2		_			Increas Decrea		
	122C-1 122C-2					Increas Decrea		
	122C-1 122C-2					Increas Decrea		
	122C-1 122C-2			_		Increas Decrea		
Par	t 4: Sigr	n Belo	ow .					
By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct							rue and correct.	
	X /s/ Ty B I		X	Signature of I	Debtor 2			
	Date 12/	30/202 / DD /		Date	DD / YYYY			